REPORT OF

The Commission on The Reduction of Sexual Assault Victimization in Virginia

TO THE GOVERNOR AND THE GENERAL ASSEMBLY OF VIRGINIA



SENATE DOCUMENT NO. 31

COMMONWEALTH OF VIRGINIA RICHMOND 1993



Donald S. Beyer, Jr.

Office of the Lieutenant Governor Richmond 23219

(804) 786-2078

February 10, 1993

TO:

The Honorable Lawrence Douglas Wilder Governor of Virginia

Members of the 1993 General Assembly

It is with great pleasure that we present the report from the Commission on The Reduction of Sexual Assault Victimization in Virginia (SJR 108). Our Commission was established to closely scrutinize resources and modalities of treatment and education for juvenile sex offenders and community based programs for child victims of sexual abuse. The Commission was further directed to develop cost effective mechanisms for coordination and expansion of resources and treatment services.

Over the course of our work, we heard graphic and tragic testimonies from victims, offenders, those who provide services, and concerned citizens. We have proposed legal remedies and programmatic solutions to a very painful and difficult problem which is so often hidden from public awareness.

We will continue to work on this problem in the coming year to ensure the safety and welfare of our Commonwealth's children. We appreciate your support of these efforts in the next year.

The Honorable

Domald

Beyer, Jr.

Chair

The Honorable R. Edward Houck

Vice-Chair

COMMISSION MEMBERSHIP

Lieutenant Governor Donald S. Beyer, Jr. - Chair
Senator R. Edward Houck, Vice-chair
Delegate Thomas G. Baker, Jr.
Delegate Jay DeBoer
Delegate Linda T. (Toddy) Puller
Senator Janet Howell
Sylvia Clute, Attorney at Law
Honorable John Kloch, Commonwealth's Attorney, Alexandria
W. Samuel Sadler, The College of William & Mary
Howard M. Cullum, Secretary of Health & Human Resources
James W. Dyke, Jr., Secretary of Education
O. Randolph Rollins, Secretary of Public Safety
Mr. Robert N. Baldwin, Executive Secretary, Virginia Supreme Court
Ms. Karen Lebo, Office of the Attorney General

SUBCOMMITTEE MEMBERSHIP

LEGAL ISSUES

Delegate Jay DeBoer - Chair

Sylvia Clute Attorney at Law

Honorable John Kloch Commonwealth's Attorney, Alexandria

Mr. Robert N. Baldwin Virginia Supreme Court

Ms. Karen Lebo Office of the Attorney General

Ms. Mandie Patterson
Dept of Criminal Justice Services

Mr. Oscar Brinson, Esq. Division of Legislative Services Connie Kirkland

Honorable Dale Harris Domestic Relations Judge

Mr. Gregory C. Auditore Henrico County Division of Police

Ms. Carol Woodward, Esq.

Mary Ellen Smith

Staff:

Dana Schrad, Crime Commission
Pat Groot, Virginians Alligned
Against Sexual Assault

VICTIM TREATMENT

Delegate Linda T. (Toddy) Puller - Chair

Howard M. Cullum

Secretary of Health & Human Resources

Mr. Tim Gleeson

Alexandria Police Department

Ms. Jill Baker

Chesapeake Bureau of Social Services

Dr. Helen Foster

Ms. Eileen Wagner

Ms. Heidi Wilson-Abbott

Hazel, Thomas

Ms. Linda Liverman Tri-Port Terminals

Pat Cheeks, RN, MSN

Ms. Patti Magnone Youth Advocate. DYFS

Staff:

Amy Bullis, Henrico V/WAP

Julie S. Copeland, Office of Lt. Governor Bill Desmond, Goochland, Powhatan CSB

Diane Maloney, DCJS

Linda Struck, Child Protective Services

OFFENDER SERVICES

Delegate Thomas G. Baker, Jr. - Chair

O. Randolph Rollins

Secretary of Public Safety

Mr. Peter Roussos

Fairfax County Juvenile Court

Honorable Lawrence Janow

Chief Judge, 24th Judicial Circuit

Mrs. Toni Wilson

Dr. Donna Elder

Ms. Nancy Parr

Deputy Commonwealths' Attorney

Issac Van Patten, Ph.D. & LPC

Ms. Suzanne Crockett

Staff:

Dr. John Hunter, Director, The Pines

Dr. Russ Petrella, Dir. Mental Health

Ms. Gayle Turner, Dir., Learning Center

Programs

Mr. Ed Wieckowski, Hanover Learning

Center

Ms. Patti Winterberger

PREVENTION & EARLY INTERVENTION

Senator Janet Howell - chair

W. Samuel Sadler
The College of William & Mary

James W. Dyke, Jr. Secretary of Education

Mr. N. Dickon Reppucci, Ph.D. Department of Psychology, UVa

Ms. Marjorie Lewis Child Assault Prevention Program

Ms. Fae Deaton, LCSW Families United

Ms. Ann Childress Child Protective Services Fran Myers, Department of Education

Ruth Dieke, ASK, Inc.

Staff:

Ms. Harriet Russell, Dir., Office of Prevention Ms. Angela Burks, Department of Health Ms. Gerry Luongo, Children's Resource Center

ISSUES INTEGRATION

Lieutenant Governor Donald S. Beyer, Jr. Senator R. Edward Houck

Staff:

Ms. Judy Divers, Office of Health and Human Resources

Ms. Fran Ecker, Dept. Criminal Justice Services

Ms. Gail Shea Nardi, Office of the Lieutenant Governor

Ms. Nancy Ross, Director, Commission on Youth

We Can Break the Cycle

In the summer and fall of 1992, we unleashed a nightmare: the pain and terror of children violated by incest and other sexual assault. In four public hearings, brave Virginians told deeply personal stories of tragedy exploding from their experience as child victims of sexual assault. Many had contemplated suicide; some still do. Most had been hospitalized; some still are. All knew the men, and occasionally the women, who had assaulted them.

Their stories tear at the soul. One Tidewater mother told of discovering physical evidence in her daughter's diaper that she had been sexually penetrated. A woman from Petersburg recounted her days in a rocking catatonic trance and her eventual successful prosecution of the man who had raped her -- her father. In Wytheville, we learned of a father who hanged his young daughter's cat by the neck from a tree, threatening to do the same to her if she told anyone of the years of sexual assault she had endured at his hands. In Richmond, a 28-year-old man confessed to having sex with more than 200 women in a frantic effort to prove his manhood -- and to having more than once had the sodomizer of his youth, a trusted family friend, in the sights of a high-powered rifle. One mother broke down before us as she recalled her three-year-old daughter's panic when her father innocently rested his head in her mother's lap as they watched television at home.

The sexual assault of children is a shockingly widespread, darkly secret, and powerfully destructive force today in Virginia and in America. We know that most adults find it hard to accept that such crimes are committed at all, much less in the numbers now being reported; denial is the automatic reaction of virtually everyone to the suggestion or the disclosure of the sexual assault of a child. We do not want it to be true. Yet we have learned that one in four girls and one in ten boys will be a victim of sexual assault of some kind before they reach the age of 18. The effects of such abuse are often crippling and always lifelong.

Though the human cost cannot be measured in numbers, the cost to society can. Child sexual assault, often unrecognized and untreated, exacts extraordinary costs from the Commonwealth. Twenty percent, approximately 3,000 inmates, of Virginia's adult prison population have been arrested for sexual offenses at some time. Research tells us that overwhelming number of them were themselves victims of child sexual assault. Childhood sexual victimization has direct causal links with prostitution, drug addiction, alcoholism, chronic depression and suicidal behaviors. Psychological dissociation occurs at a significantly higher rate for victims of sexual assault. Dissociative disorders include the "Three Faces of Eve" in which the victim develops multiple personalities to escape from the trauma of abuse. Victims of sexual assault also are at high risk of suffering from compulsive disorders, confusion about sexual identity, and crippling depression.

Paradoxically, given the horror at the root of the issue, the work of this Commission has been essentially optimistic. There are clear and achievable steps to be taken. We <u>can</u> break cycles of child sexual assault and incest which have persisted for generations, because we have learned how they work. We know that virtually all sexual offenders were first child victims. Most adult sexual offenders admit to having first acted out sexually as children or adolescents. Nationally, adolescents commit 30% to 60% of child sexual molestations, and 20-30% of rapes.

The clear, powerful answer to greatly reducing child sexual assault in Virginia is threefold: to change the structure of the legal system to hold offenders responsible for their actions and to prevent further child violation; to intervene with aggressive treatment for children who are victims, both to foster healing and to inoculate against later offender activity, and to intervene with rehabilitative correctional treatment for child and adolescent perpetrators to minimize repeat behavior; and to prevent child sexual assault in the first place by arming children with the information and the psychological tools to avoid becoming victims. We have long warned our kids to beware of a stranger with candy, but we do not know how to tell them that a loved and trusted family member or caretaker has no right to "secret touching" either.

Changing the legal structure, intervening aggressively with both victims and offenders, and teaching our children and our communities to recognize, prevent assault and disclose abuse -- this direct approach can have a marked and multi-generational impact on the incidence of child sexual assault.

CHANGING THE LEGAL STRUCTURE

We recommend a series of specific changes to the Code of Virginia; to the training regimens of judges, lawyers, and court personnel; and to the state constitution. Crimes against children must be taken as seriously as crimes against adults. The Code should be amended to make explicit that children are presumed to be competent witnesses.

The parental exception for child pornography should be eliminated, with common-sense safeguards, to afford protection to the child victimized by his or her own parent. "Inanimate" should be deleted from the offense of penetration with an inanimate object, recognizing the damage that results from digital and other sexual penetration. Juvenile and Domestic Relations Judges must be given authority to allow victim impact statements as part of presentence investigations, to give families of the violated input into what happens to the offender. We support amending the Constitution of Virginia to make clear the General Assembly's right to enact retroactive legislation that enables adult survivors of child sexual assault to sue for damages for intentional personal injury.

We should amend the Code of Virginia to allow monetary damages of up to \$100,000 for aggravated sexual battery. We recommend that a statute be enacted to allow for joint trial of defendants charged in "gang rape," the contemporaneous sexual assault of the same victim. And we offer a number of concrete proposals for additional training for law enforcement administrators, attorneys, judges, guardians ad litem, and court services officers to deal effectively with child sexual assault cases.

The aggregate effect of the many legal structural changes, large and small, will be to create a more secure, fair and equitable system for the successful prosecution of child sexual offenders and for ensuring that the seriousness of the crime is reflected in the penalty.

INTERVENING WITH CHILD VICTIMS AND JUVENILE OFFENDERS

We recommend a series of initiatives to improve the management and availability of intervention services for both victims and juvenile offenders. All child victims do not become offenders, but an overwhelming number of offenders were victimized as children. There is evidence that <u>any</u> healing intervention offered to a child who has been sexually abused may be sufficient to inoculate that child from later offending activity.

Too often, child victims have no access to critical intervention and mental health services. Others do not receive available therapies because there is no knowledgeable adult - parent, counselor, or designated professional - to guide them through the process. In addition, private health insurance does not provide adequate mental health coverage for the intervention and therapy needed by survivors of child sexual abuse.

The Commission heard conflicting evidence on the effectiveness of rehabilitation services for adult offenders, but we affirm the obvious wisdom of breaking the cycle of sexual assault at the earliest opportunity by investing in all necessary treatment for child and adolescent offenders. The success of Virginia's residential adolescent treatment centers in preventing recidivism among sexual assault offenders has been significant.

Specifically, we propose that Virginia:

- o Ensure that every child sexual assault victim has a trained case manager, who is a member of a local multi-disciplinary team, to oversee the case coherently and aggressively;
- O Determine the steps necessary to expand the responsibilities of Child Protective Services to include alleged child sexual assaults perpetrated by persons not in caretaking roles;
- o Make major new investments in mental health treatment services for sexually abused children and adults molested as children, through local Community Services Boards and private providers:

- o Make new budget commitments to expand Victim/Witness Assistance Programs, Court-Appointed Special Advocates (CASA), and sexual assault crisis centers directly serving the victim of sexual assault;
- o Expand community-based intervention and treatment services for juvenile sexual offenders to reduce the likelihood of their becoming adult offenders;
- o Expand by 30 beds the Department of Youth and Family Services residential offender treatment programs:
- o Support a university-based research consortium to study, among other issues, the efficacy of biomedical treatment interventions for juvenile sex offenders; and
- o Encourage judges to mandate treatment and long-term follow-up for adolescent and child sex offenders, involving their parents when appropriate.

These investments will give Virginia an intervention structure with the greatest potential for interrupting the multi-generational cycle of these secret crimes against children, by providing therapy which can heal the trauma of child sexual assault and prevent recurring adolescent and later adult sexual assault activity.

PREVENTION

The pain of child sexual assault stirs in us such disturbing and powerful feelings that we are startled by the comparative simplicity of the answer: prevention through education.

The world in which our children live throbs with messages of exploitative sex, violence, abuse of power, child sexuality, and negative or stereotyped attitudes about male-female roles and relationships. But the same powerful forces which have shaped these destructive images -- television, movies, advertising -- can become powerful, positive educational tools. And we have in our communities the institutions -- schools, universities, public and private agencies -- through which the message can be disseminated and the training provided.

Identifying the most positive and effective message is more complex -- we must understand the dynamics of child sexual assault before we can educate ourselves and our children to recognize and prevent them.

We know that education means prevention. In hundreds of performances in schools across Virginia, <u>Hugs & Kisses</u> the child sexual abuse prevention play produced by Theatre IV of Richmond, has never failed to elicit from an audience of school children at least one disclosure of sexual abuse.

We propose the following prevention recommendations:

- o Create a separate sexual abuse prevention component in the state's Family Violence Prevention Program.
- o Launch a major media campaign to educate the public about sexual assault and establish local "media watch" monitoring efforts.
- o Provide information and training on recognizing the signs of sexual abuse and the early signals of deviant sexual behavior to parents, teachers, police, court and social service workers and others who work with children.
- o Increase funding for the play <u>Hugs & Kisses</u> to support 340 performances in one school year.
- o Ask the Department of Education to ensure that all school divisions implement the Family Life Education Standards of Learning on child abuse.

CONCLUSION

Denial and silence are the allies of child sexual assault. Terror, shame and crippled lives are its legacy. Many courageous women and men shared their pain and their hopes with us. They asked us to bring their stories out of the shadows and into the light. They told us to believe the children.

Many caring and committed professionals and public servants helped us to frame the issues and shape our recommendations. In the months and years ahead, we pledge to bring the tragedy of child sexual abuse before the people of Virginia and their leaders. We are confident that they will see the wisdom of intervening in the cycle of child sexual abuse and that they will be willing to commit the resources and the good faith of the Commonwealth to that end.

RECOMMENDATIONS

The theme which resonated through the Commission's public hearings was that there are solutions to the painful and difficult challenges of child sexual assault, but the barriers of public disbelief and denial must be broken if those solutions are to be available to the most vulnerable of our Commonwealth - our children.

The critical first step is to <u>prevent</u> child sexual assault in the first place through proven, comprehensive education and prevention programs which must be made available in every community in Virginia. In addition, we must restructure the legal system, strengthening incest and child sexual assault statutes to ensure that they are a significant deterrent which reduces the incidence of these crimes and, therefore, the number of child victims and potential offenders.

Finally, both victims and offenders must receive the intervention and treatment needed to break the cycle of abuse and to reduce its terrible human and financial costs. It is imperative that the legal system recognize the seriousness and the long-term societal consequences of these offenses and treat all involved in the legal process -- victims, offenders and their families -- fairly, equitably and knowledgeably. Equally critical is to ensure that when a sexual assault occurs, its victim receives comprehensive and coordinated intervention and adequate treatment which begin the healing process rather than deepen the victim's trauma. And if the cycle is to be broken, we must go beyond the anger and horror ignited by these offenses to see that offenders receive treatment aimed at reducing the known high recidivism rate for sex offenders.

I. LEGAL ISSUES SOLUTIONS

LEGAL CODE REVISIONS

I. The <u>Code of Virginia</u> was amended in 1991 to allow adult survivors of child sexual abuse to initiate civil actions for personal injury when the two-year statute of limitations would otherwise bar the suit. In order for the intent of the 1991 amendments to be carried out, the Virginia State Constitution must be amended to make clear the General Assembly's right to enact retroactive legislation that enables adult survivors of child sexual assault to sue for intentional personal injury damages.

Recommendation:

o Support the passage of an amendment to the Virginia Constitution that will allow retroactive legislation in cases of intentional wrongs so that legislation may be passed to allow adult survivors of child sexual abuse who experience a delayed discovery of the abuse and/or delayed discovery of the causal connection between the abuse and their injuries, to pursue personal injury damage claims which otherwise would be barred by the statute of limitations.

II. The Virginia Rape Shield Laws, found in <u>Code of Virginia §§18.2-67.6</u>, -67.7 and -67.8, address the issues of physical resistance, admitting evidence of the complaining witness's prior sexual conduct and closed preliminary hearings. However, the rape shield laws do not apply to the offenses of crimes against nature, <u>Code of Virginia §18.2-361</u>, incest, <u>Code of Virginia §18.2-366</u>, or taking indecent liberties with children, <u>Code of Virginia §§18.2-370</u> and -370.1.

Recommendations:

- o Amend §§18.2-67.6,-67.7 and -67.8, the rape shield statutes, to incorporate by reference Code of Virginia §§18.2-361, -366, -370 and -370.1.
- o Amend §18.2-67.10 to include in the definition of "complaining witness" the offenses of crimes against nature, incest and indecent liberties with children, and to delete the term, "inanimate," from inanimate object sexual penetration.

III. The <u>Code of Virginia</u> §19.2-271.2 sets out the general rule that husbands and wives may not be compelled or allowed, without the consent of the other, to testify against each other in most criminal cases. In cases of child sexual abuse, the spouse of the offender should be allowed, or the court should be able to compel the spouse, to testify against the offending spouse. Additionally, there exists a ten day reporting requirement for the reporting of any form of marital sexual assault.

Recommendations:

- O Amend Code of Virginia §19.2-271.2 to include all criminal sexual assault offenses in Chapter 4, Article 7 of Title 18.2, and §18.2-361, the crimes against nature statute, and §18.2-366, the incest statute, within the list of criminal sexual offenses for which a spouse may be compelled or allowed to testify against the accused.
- o The Attorney General's Task Force on Domestic Violence should consider recommending the elimination or extension of the ten-day reporting requirement in the offenses of marital rape, marital forcible sodomy, marital object penetration and marital sexual assault. The Commission will send a letter of support for this action.

IV. In December, 1988, the Virginia Court of Appeals decided the case of <u>Durant v.</u>

<u>Commonwealth</u>, 7 Va. App. 454, and held that the trial court erred in excluding the testimony of a seven-year-old witness. "In Virginia, a child need not have reached a certain age in order to be competent as a witness." <u>Durant</u>, at 462.

Rule 601 of the Federal Rules of Evidence provides that the competency of any witness, including a child of any age, should be presumed, and the burden should be on the defendant to prove the incompetency of the witness to testify.

Since the <u>Durant</u> case states that children can be competent witnesses, this presumption of competency (which is rebuttable by the opposing party) should be set out clearly in the <u>Code of Virginia</u>.

Recommendation:

o Amend the <u>Code of Virginia</u> to add a new section that incorporates the standard of presumed competency of a witness, including a child witness, as set out in Rule 601 of the Federal Rules of Evidence.

V. Virginia has severely limited the admission of spontaneous declarations by an alleged victim of sexual assault by allowing the admission only in cases of rape, and only as corroborating evidence. This greatly limits the avenues of prosecution of sexual assault against children, particularly when a charge of rape or sodomy is reduced to a lesser charge. To effectively deter sexual assault, victims must be able to successfully proceed with prosecutions of all types of sexual assault, beyond the "ultimate" crime of rape.

Recommendation:

o The exception to hearsay rule concerning spontaneous declarations should be enacted by statute, in Title 8.01 and Title 19.2 of the <u>Code of Virginia</u>, to be applicable in civil cases and criminal prosecutions, and be consistent with the decision in <u>White v. Illinois</u>. It should provide that the "first complaint" or "excited utterance" to a third party by a victim of sexual assault under Chapter 4, Article 7 of Title 18.2, or for family offenses or crimes against children under Chapter 8, Article 4 of Title 18.2 is admissible for all purposes.

VI. In 1983, the Virginia General Assembly passed enabling legislation to create <u>Code of Virginia</u> §19.2-299.1, a criminal procedure statute that allows a victim to complete a victim impact statement, which then becomes part of the pre-sentence investigation. The statement, which is completed on a state-approved form, recounts the victim's physical and psychological injuries, including any major life changes that may have occurred as a result of the crime.

A few judges in Virginia have chosen to interpret <u>Code of Virginia</u> §19.2-299.1 as allowing the use of victim impact statements in Juvenile and Domestic Relations Court. If such use of victim impact statements in Juvenile and Domestic Relations Court is intended, then it should be expressly stated in the <u>Code</u>.

Recommendation:

o Amend Code of Virginia §16.1-273 to include language similar to that in §19.2-299.1 specifically to give Juvenile and Domestic Relations Court judges the same authority as Circuit Court judges in allowing victim impact statements to be considered in sexual assault cases.

VII. The Code of Virginia §18.2-366 does not impose a harsh enough penalty on incest with children under the age of 13 and does not sufficiently protect children through the age of 18. By delineating penalties based on the age of the minor child, Virginia's law implies that an older child conceivably could consent to incest. If the incest victim is under the age of 13, then the accused perpetrator of the incest would be charged with rape under Code of Virginia §18.2-61.

Recommendation:

o Amend §18.2-366 to impose a Class 4 penalty on any person who commits adultery or fornication with a daughter, granddaughter, son, grandson, father or mother; and, amend the language addressing the parent or grandparent who commits adultery or fornication with his or her child or grandchild to impose a Class 3 felony if the child victim is between the ages of 13 and 18.

VIII. The <u>Code of Virginia §18.2-374.1:1</u>, which sets out the penalty for the possession of child pornography, includes an exception for the child subject's parent, guardian, or blood or marital relation. By excepting this class of relatives from prosecution under this statute, a violator of this statute who exploits a child relative escapes prosecution.

Recommendation:

o Amend §18.2-374.1:1, the child pornography statute, to eliminate the parental exception.

IX. Sexual assault by a non-custodial parent during an unsupervised visitation is an important concern. Judges determine whether a non-custodial parent should be allowed unsupervised visitation if charges of child sexual assault are pending. A <u>Code</u> section should be enacted that expressly allows judges to issue child abuse protective orders pending the completion of a criminal prosecution for child sexual assault.

Recommendation:

o Encourage judges to issue child abuse protective orders where allegations of child sexual assault are pending in a civil trial or criminal prosecution, or before Child Protective Services.

X. The Code of Virginia §16.1-305 should be amended to add enabling language to require a court order in civil child abuse cases to be communicated to the Department of Corrections or the Department of Youth and Family Services, and to the Commonwealth's Attorney. This will facilitate follow-up investigations and will make it possible for the Commonwealth's Attorney to prosecute court order violations.

Recommendation:

o Amend §16.1-305 to require the Juvenile and Domestic Relations Court to forward final orders in civil abuse cases, when there is a collateral criminal prosecution, to the Department of Corrections or Department of Youth and Family Services, and to the appropriate Commonwealth's Attorney.

XI. The <u>Code of Virginia</u> §18.2-361, the crimes against nature statute, imposes a Class 3 felony penalty if the perpetrator is the child victim's parent, and the child is between the ages of 13 and 15. Any other person who violates this law receives a Class 6 felony penalty. This statute should be expanded to include a person who is in a supervisory or custodial relationship with a minor child, or is a sibling of the minor child. The penalties in the crimes against nature statute should be amended to coincide with the incest statute.

Recommendation:

o Amend <u>Code of Virginia</u> §18.2-361 to address siblings and persons in supervisory or custodial relationships with a minor child and amend the penalties to coincide with the incest statute.

XII. The <u>Code of Virginia</u> §§18.2-63 and -64.1 addresses the crimes of carnal knowledge of minors in general, and certain minors who are held in the custody of the Department of Youth and Family Services. Section 18.2-64.1 applies to those situations when a juvenile offender is held in a state juvenile detention facility or jail and, with no means of escape, is sexually abused by a person providing services to the facility, such as an employee. This statute should be expanded to include the offenses of crimes against nature and object sexual penetration. Additionally, no employee or service provider should take sexual advantage of an incarcerated youth, regardless of a close proximity in age. The misdemeanor penalty for violators whose victims are less than three years their junior should be eliminated, and any person prosecuted under this statute should receive a Class 6 felony penalty.

- o Amend Code of Virginia §18.2-63 to replace "fornication" with a Class 4 misdemeanor penalty, and amend §18.2-64.1 to remove the misdemeanor penalty for perpetrators less than three years older than their victims, and expand the statute to include the offenses of crimes against nature and object sexual penetration, as respectively defined in §18.2-361 and §18.2-67.2.
- o Amend §§18.2-63 and -64.1 to include a definition of carnal knowledge.

XIII. Additionally, <u>Code of Virginia</u> §18.2-66 provides that marriage is a defense to statutory rape of 14-year-old female victims. This statute ignores the real possibility of the rape of a minor male, because the defense is, by definition, afforded only to men. More importantly, marriage as a defense to a charge of statutory rape is an outmoded concept that promotes marriage as a criminal defense.

Recommendation:

o Repeal <u>Code of Virginia</u> §18.2-66, which provides a defense to statutory rape for the subsequent marriage of a 14-year-old female.

XIV. The aggravated sexual battery statute, <u>Code of Virginia</u> §18.2-67.3, does not carry a classified penalty, but instead imposes a specific felony penalty of one to twenty years imprisonment. Since other classified felony penalties carry additional monetary penalties, this statute should be amended to include a financial penalty in accordance with other felonies.

Recommendation:

o Amend Code of Virginia §18.2-67.3, the aggravated sexual battery statute, to add the following language to the penalty: "...and a fine of not more than \$100,000."

XV. The <u>Code of Virginia</u> §18.2-67.2 addresses the crime of inanimate object sexual penetration. The term "inanimate" fails to take into its definition consideration of the serious physical and psychological injuries sustained by victims of digital and first sexual penetration.

Additionally, <u>Code of Virginia</u> §18.2-67.5, the attempted sexual abuse statute, should be amended to delete the term "inanimate" from the offense of inanimate object sexual penetration.

Finally, <u>Code of Virginia</u> §18.2-67.10, which includes a definition for inanimate object sexual penetration, should be amended to delete the word "inanimate" from the definition.

Recommendation:

o Amend Code of Virginia §§18.2-67.2, -67.5 and -67.10 to delete the term "inanimate" from inanimate object sexual penetration.

XVI. Code of Virginia §18.2-48, which addresses the abduction of a female under the age of sixteen for the purpose of concubinage or prostitution, should be amended to include the abduction of male minors under the age of 16.

Recommendation:

o Amend Code of Virginia §18.2-48 to make the offense gender-neutral in its application.

XVII. Victims of gang rape or other types of contemporaneous sexual assault usually must testify at each of the defendants' separate trials, which compounds the trauma of the sexual assault victim. By joining co-defendants in one trial for the prosecution of contemporaneous and related acts of sexual assault against one victim, the victim would not have to testify as to the same evidence in any number of successive trials.

Recommendation:

o Enact a statute to allow for the joint trial of defendants charged with the contemporaneous sexual assault of the same victim.

II. VICTIM TREATMENT SOLUTIONS

CASE MANAGEMENT SERVICES FOR VICTIMS

No single agency can offer all services which may be needed by a victim of child sexual assault and the victim's family. A team approach to the delivery of services to a child victim of sexual assault and her or his family has been found to be the most efficient and effective way to ensure prompt access to services. One member of the team, trained in child sexual assault issues, should be designated the case manager.

In addition, children's advocacy centers, such as those in California and Alabama, offer children a safe place for interviews with investigative teams and case managers and for medical examinations if necessary and help eliminate duplicitive and unnecessary interviews.

- o All child victims of sexual assault should have prompt access to case management and affordable treatment. These services should be delivered through a coordinated effort among agencies. One agency should assume the role of case manager.
- Encourage the Department of Criminal Justice Services to continue to provide multidisciplinary and discipline-specific training to judges, prosecutors, law enforcement investigators, child protective services staff, and allied health and mental health professionals on child sexual assault issues. Interdisciplinary teams made up of law enforcement officers, commonwealth's attorneys, child protective services workers, and mental health providers should be developed to intervene with all child victims of sexual assault. Court Appointed Special Advocates (CASA), Victim/Witness Programs, sexual assault crisis centers, medical professionals, and other professionals should be included on teams as appropriate and available.

o Through the Department of Criminal Justice Services, strengthen existing teams and develop new teams, through training and support, in localities where they do not exist.

Cost: \$68,000

- o Develop local Child Advocacy Centers where possible to provide a "child-friendly" environment in which to respond to child victims. The Department of Criminal Justice Services will provide technical assistance to localities upon request.
- o Encourage multi-disciplinary teams, in their organizational training, to limit the number of interviews with a child victim to reduce the re-victimization of the child.

The commission will send a letter of support of these efforts to the Department of Criminal Justice Services.

CENTRAL SERVICE ACCESS

Currently, there is no single portal through which child victims enter to receive services upon disclosure of sexual assault. By law, in cases of abuse in which the perpetrator is not in a caretaking role, Child Protective Services does not become involved. Often the child's family must become the case manager in order to locate, initiate, and/or negotiate follow-up services during a time of crisis.

A professional trained in child sexual assault issues, knowledgeable about services in the community, and accessible 24 hours a day should be available to intervene and facilitate the delivery of intervention and treatment services to victims and their families, whether or not the perpetrator was in a caretaking role. Child Protective Services fulfills these requirements, and should be the agency to broker such services.

Although the commission advocates the changing of the policy of Child Protective Services to include victims of non-caretaker sexual abuse, the fiscal and legal implications should be determined before the policy change can be accurately reflected in the code.

Recommendations:

o Request the Commission appoint a subcommittee to study the impact of amending §63.1-248 of Code of Virginia to provide for services to child victims of non-caretaker sexual abuse through Child Protective Services. The study should include the evaluation of the incidence of non-caretaker abuse, the services needed by the victim and family, the development of a unified system response, and the identification of the resources needed to implement such a plan. The subcommittee should report its findings, with legislative and budget proposals, to the Commission by December, 1993.

Through a letter of support from the Commission, endorse the two recommendations of the State Board of Social Services task force on the role of the Department of Social Services in 1) not removing out-of-family caretakers from the purview of Child Protective Services and 2) changing the standard of proof from clear and convincing to preponderance of evidence in order to support a finding of founded in child abuse and neglect cases and concurrently removing reason to suspect as a dispositional finding.

FAMILY COURT

Because there is no single portal through which victims can receive treatment services, the current court system configuration in Virginia with respect to child sexual abuse prosecution often requires the victim to undergo two separate legal proceedings in District and Circuit Court. The Juvenile and Domestic Relations Court is not of record and has jurisdiction over child abuse and neglect and domestic violence protection orders. The Circuit Court has jurisdiction over felony crimes against children. In cases of disputed custody, where an allegation of sexual abuse is made by one parent against the other, the case may originate in Juvenile and Domestic Court and then is filed in Circuit Court. Concern over trauma to the child and then need to provide distinct expertise and support for all family related legal matters prompted the 1989 General Assembly to pilot for two years a Family Court Concept. The pilot concluded that through the establishment of a single court the length of time to resolve emotionally charged litigation limits the detrimental impact on the children and adults involved in the proceedings.

Recommendation:

o Endorse the Family Court Pilot Project's recommendation, through a letter of support, that be one trial court which has comprehensive jurisdiction over child and family-related legal issues should be created.

TREATMENT OF VICTIMS AND FAMILIES

The availability of treatment is pivotal to healing the wounds of child sexual abuse and breaking its generational cycle. Most Community Services Boards (CSB's) across the Commonwealth have waiting lists, and child sexual abuse victims seeking treatment frequently encounter delays ranging from weeks to months. To ensure a flexible response to this need for outpatient services, the Commonwealth should provide additional maintenance budget funds for CSB's to respond to local needs.

The resources needed to shore up the overburdened treatment system for children are still inadequate to meet the needs of troubled adults who were victims of sexual abuse in childhood. The number of such sexual abuse survivors is staggering, given that no less than 20 percent of females and 10 percent of males report having been sexually victimized as children. It must be recognized that the Commonwealth's initiative in making treatment available will reduce but not eliminate the problem. Only sustained investments in treatment, proportional to local need and expanded during subsequent funding years, will bring Virginia to the point where no sexually abused child or adult is denied services.

Recommendations:

Support funding for each Community Services Board to support (directly or by contract) an appropriately trained professional to serve as an evaluator, treatment provider, trainer and resource person for victims of sexual assault. A minimum of one community-based therapist position should be developed to serve each of the 40 Community Services Boards catchment areas.

Cost: \$1,600,000

- Additional therapists skilled in the treatment of sexual abuse should be targeted for those catchment areas which serve large proportions of Virginia's population, or in which victimized adults and children are underserved based upon the Mental Health Profile Survey which is currently being completed. The results of the survey will be presented to the Commission in December, 1993 with identified budget needs for the next biennium.
- Through letters from the Commission to the Department of Youth and Family Services and to the Virginia Supreme Court, urge that detained or committed, institutionalized, run away and throw away children in residential placement receiving treatment services or before Juvenile and Domestic Relations Court should be assessed as part of the intake process for past history of sexual abuse and provided treatment as needed.

SUPPORT SERVICES TO VICTIMS AND FAMILIES

Advocacy programs such as the Victim/Witness or Victim Assistance programs (V/W programs), Court Appointed Special Advocates (CASA), and sexual assault crisis centers, provide specific, critical services to victims and their families. However, the availability and funding of such services have been inconsistent.

Victims and their families use victim-assistance programs to negotiate their way through the legal system, to learn how the legal process works, to prepare victim impact statements, to apply for crime victim's compensation if applicable, to learn about the parole process, for support through the court process, and transportation and accompaniment to court.

Court-appointed special advocate (CASA) programs use volunteers appointed by judges to advocate for the child in cases of child abuse and neglect, disputed custody and child-in-need-of-services cases.

Sexual assault crisis centers, 23 statewide, provide crisis intervention for victims of all types of sexual assault. Often, volunteers at the centers accompany victims to legal proceedings and medical exams, offer emotional support to victims and their families and make referrals for mental health treatment. Funding comes from a wide variety of sources - state, local, federal, United Way, and individual fundraising. This funding is often inconsistent, and centers devote resources -- normally used to serve clients -- to raising funds for the centers.

Recommendations:

o Support the continuation of existing Court Appointed Special Advocate (CASA) programs and state office staff.

Cost:

\$475,000

- o Support \$150,000 budget amendment submitted by the Department of Criminal Justice Services to fund existing CASA programs.
- o Fund basic Victim/Witness Assistance Program services to the Commonwealth

Cost:

\$3,673,000

- 1. Provide adequate staffing to the 17 existing Victim/Witness Assistance Programs

 Cost: \$1.804.000
- 2. Expand V/W assistance programs in localities that have the highest need.

Cost:

\$ 572,000

3. Implement 28 regional programs which need service, but require less than full-time staffing

Cost:

\$1,232,000

4. Fund one FTE to administer, monitor and evaluate grant programs

Cost:

\$ 65,000

o Expand funding for sexual assault crisis centers statewide, and initiate in localities that need them.

Cost:

\$2.7 million

1. Meet local need for services by providing adequate staffing to the 22 existing sexual assault crisis centers.

Cost:

\$1,033,435

2. Provide services, at adequate staffing levels, to localities that need centers and do not have them.

Cost:

\$1,666,565

o Support \$300,000 budget item submitted by the Department of Health to fund the 22 sexual assault crisis centers.

INSURANCE ISSUES

Many victims of child sexual assault or incest are unable to obtain insurance reimbursement for mental health treatment. Insurance companies require a specific clinical diagnosis in order to qualify for reimbursement, and many of the diagnoses that are associated with sexual assault victimization are excluded by insurance companies. Victims of sexual assault are therefore excluded from reimbursement and as a result, have restricted access to adequate health care.

In addition, insurance coverage for mental health treatment is not equitable with coverage for physical health needs. The insurance industry has institutionalized the stigma of seeking mental health treatment through inequities in coverage. Such inequities are reflected in reimbursable diagnoses, lengths of treatment, number of office visits, percentage of reimbursement and lengths of in-patient care for mental health treatment. Such treatments are often not offered in health care packages at the same rate as physical health coverage.

Recommendations:

- Insurance coverage for mental health treatment should include provisions which make such coverage equitable with coverage for physical health needs. A letter in support of this recommendation will be sent to both the Special Advisory Commission on Mandated Benefits and the Commission on Health Care for All Virginians.
- o Through a letter from the Commission, request that the Special Advisory Commission on Mandated Benefits examine and propose remedies to reduce the barriers to treatment faced by sexual assault victims, as well as the stigma of being labeled mentally ill.

CRIME VICTIMS COMPENSATION FUND

The Crime Victims' Compensation Fund (CVC) was created in 1976 by the General Assembly to compensate victims of crime or their survivors who are not covered by other collateral resources. Reimbursement can be made for lost wages, funeral expenses, mental health costs and other financial hardship resulting from the crime. The CVC receives most of its funding from fines levied on criminals. The CVC is an important resource for sexual assault victims receiving mental health care, but it is underfunded

Recommendation:

o Amend Code of Virginia §19.2-368.18 to expand fines that are applied to Crime Victims Compensation Fund (CVC) to include all misdemeanors, not just Class I and some Class II misdemeanors in order to better fund CVC.

EDUCATIONAL TRAINING FOR ALLIED PROFESSIONALS

Most academic programs include little or no training in identifying or treating child sexual assault victims.

Recommendations:

- o Post-secondary institutions should provide courses on sexual assault in their psychology, social work, law, and other human service programs whose graduates are likely to encounter victims and families of victims of child sexual assault. The Commission will send a letter to the State Council of Higher Education in Virginia (SCHEV) requesting this action be taken.
- The Commission endorses the Board of Health Professions recommendation from SJR 41:
 "... request the State Council of Higher Education in Virginia and the Virginia Community
 College System to study and resolve the need for greater exposure to the causes and
 consequences of sexual assault in professional educational programs for current and future
 practitioners...".

LEGAL AND ALLIED PROFESSIONAL TRAINING

Attorneys are required by the state bar to participate in continuing education. An understanding of the dynamics of incest and child sexual assault cases, sensitivity to the victim and the mental, emotional and physical impact of the crime are critical for successful handling of any sexual assault case. Lack of such understanding and sensitivity can be devastating to the victim and family.

In addition, mandated reporters of abuse often are unable to recognize the signs of abuse - sexual, physical or mental. Not all signs of abuse manifest themselves in bruises or burns. All professionals required by law to report abuse should have the benefit of the knowledge and training to recognize such abuse.

- o Through a letter from the Commission to the Virginia State Bar, request that information and training on child sexual assault be included in the bar's continuing legal education program.
- o Through a letter from the Commission to the Virginia Supreme Court, request that information and training on child sexual assault be included in judges training programs.
- Training on child sexual assault issues should be offered to all professionals mandated to report sexual abuse and other forms of child abuse. The offender treatment section of this report addresses this through through a request for funds to be allocated to the Community Services Boards to be used to train professionals on issues of sexual assault victimization as well as perpetration.

III. OFFENDER TREATMENT SOLUTIONS

ACCESS TO SERVICES

All juveniles who engage in age inappropriate sexual activities, whether or not they come to the attention of the juvenile justice system, should be thoroughly evaluated and placed in an appropriate treatment setting. The seriousness of the behavior as well as the individual's amenability to treatment should determine the appropriate type and location of services. A continuum of care with consistent treatment approaches should be available.

Those with a long offending history or a history of aggressive sexual assault generally require services in a secure setting such as a youth correctional facility.

The Department of Youth and Family Services provides extensive treatment to adolescent sexual offenders involved in the juvenile justice system, but the demand for services far outstrips capacity: only 38 slots in self-contained treatment units are available in Virginia.

Successful services to juvenile sex offenders require careful assessment of the offender, well-trained professionals, and a well-educated and informed cadre of service providers. Currently these resources are available only in a limited number of communities, and few agencies have individuals with the expertise to provide leadership, services and coordination for juvenile offenders.

Recommendations:

Cost:

Increase funding for the Trust Fund created by the Comprehensive Services Act for Youth and Families to support the development of a comprehensive, community-based service delivery system with a continuum of care for 100 juvenile sex offenders for one year, which would include: diagnostic services, outpatient groups and day programs, alternative community-based living environments and residential treatment programs.

o Provide funds for the Department of Youth and Family Services to add 30 beds to existing residential treatment programs for one year.

\$2.5 million

Cost: \$250,000

o Provide funding for each Community Services Board to support (directly or by contract) an appropriately trained professional to serve as an evaluator, treatment provider, trainer and resource person for juvenile sex offenders for one year.

Cost: \$1,600,000

OFFENDER TREATMENT PROVIDER CREDENTIALING

Providing treatment services to juvenile sex offenders is a complex, specialized, high-risk endeavor. Treatment services provided by improperly trained individuals not only deny the client proper treatment but also pose significant risk to the community. The Board of Health Professions has voted to adopt a certification program for individuals providing treatment to sex offenders.

Recommendation:

o Endorse the certification program adopted by the Board of Health Professions.

SEX OFFENDER REGISTRY

Sixteen states require adult convicted sex offenders to register with law enforcement or other state agencies. The typical registry contains basic identifying information: fingerprints, photographs, date of birth, and criminal history. The information is available only to authorized law enforcement agencies or other organizations with a demonstrated need for access. Only two states are currently registering juvenile sex offenders. A committee led by the Deputy Secretary of Public Safety is recommending a legislative study to examine the feasibility of registering adult sex offenders in the Commonwealth of Virginia.

Recommendation:

o Any study of the feasibility of establishing a sex offender registry in Virginia should include a review of issues related to the inclusion of juveniles.

TREATMENT PROGRAM STANDARDS FOR OFFENDERS

A multitude of clinical, ethical and legal issues need to be considered when providing treatment services to juvenile sex offenders. In order to assure the quality of the clinical services being provided, as well as the protection of the public, clear and consistent programs standards must be employed. The National Council of Juvenile and Family Court Judges, through the National Task Force on Juvenile Sex Offending, has developed a comprehensive set of practice standards.

Recommendation:

o State agencies should require that all treatment programs for juvenile sex offenders adhere to the national standards developed by The National Task Force on Juvenile Sex Offending.

TREATMENT EVALUATION

Effectiveness of treatment programs for juvenile sex offenders varies depending upon the approach used, training of service providers, types of problems addressed and the quality of follow-up and monitoring. All of these treatment programs hold promise, but there must be a full recognition of the risks inherent in successful and unsuccessful treatment. Treatment programs which do not demonstrate reasonable levels of success and cost effectiveness should not receive public funding.

Recommendation:

State agencies should require that all treatment programs for juvenile sex offenders include an evaluation/research component.

FAMILY ROLE IN OFFENDER TREATMENT

Successful treatment of juvenile sex offenders is contingent upon a strategy which affects all family members. Parents play a significant role in the juvenile's compliance with treatment activities including aftercare and follow-up. Parents and family members frequently benefit from treatment, support and education regarding coping with, and assisting in, the treatment of the juvenile sex offender.

Recommendation:

o All treatment programs developed for juvenile sex offenders should include a family education and support component.

OFFENDER FOLLOW-UP

Upon successful completion of an offense-specific treatment program, ongoing support, aftercare, follow-up and monitoring are essential. Effective monitoring requires a long, gradual reduction in intervention, support and supervision commensurate with progress attained, but most juvenile offenders are reluctant to participate in treatment and monitoring and are unlikely to continue after they are beyond the jurisdiction of the juvenile court. Jurisdiction may be retained by the court until the offender reaches 21.

Recommendation:

o The Commission on Youth should evaluate the feasibility of establishing a mandatory 10-year follow-up program for juvenile sex offenders which could extend beyond their 18th birthday.

MANAGEMENT OF JUVENILE OFFENDERS

The identification, evaluation and treatment of juvenile sex offenders is a complex and difficult task. Parents, teachers, social workers, mental health professionals, court workers and others are often not properly trained to identify these youths and provide services to them, and training opportunities are

few. Mental health professionals may have access to occasional continuing education activities; however these vary widely in quality and content and do not provide the consistent approach to evaluation and treatment essential for effective service delivery.

Because juvenile sex offenders are reluctant to comply with treatment programs, case management requires close coordination between service providers and the legal system and consistent case management. Mandating treatment is often necessary because most offenders are not sufficiently uncomfortable with their behavior to follow through in treatment without external pressure. Clear and open communication must exist between juvenile and justice authorities and the treatment providers to ensure effective, carefully monitored services as well as protection of the public.

Recommendations:

All individuals in contact with youth (teachers, court workers, child protective services staff, and others) should be trained to 1.) recognize the early signs and symptoms of deviant sexual behavior and 2.) recognize signs of sexual assault in victims. Each Community Services

Board would provide a basis for initial training programs within their catchment area.

Cost: \$400,000

- o Juvenile and domestic relations court judges should be trained in appropriate management of juvenile sex offenders.
- o Judges should be encouraged to mandate assessment and treatment for juvenile sex offenders, including parental involvement where appropriate. Assessment should be conducted post-conviction and pre-sentencing.
- Through a letter of request to the Virginia Supreme Court, request that the court, in collaboration with The Department of Youth and Family Services and the Department of Mental Health, Mental Retardation and Substance Abuse Services, develop model court orders on the treatment of juvenile sex offenders.

RESEARCH

A consortium of university-based researchers should be established for two purposes: first, to study the nature, extent, and impact of juvenile sexual assault. This consortium should work with community agencies to evaluate the effectiveness of prevention and treatment programs.

Secondly, biomedical treatment approaches for juvenile offenders including anti-androgen medications are designed to reduce arousal by reducing hormonal levels. These medications have been used primarily with adults and do not bring about permanent change, but may lessen chronic deviant arousal and thus allow concentration on other areas of treatment. Their use with adolescents is controversial in that it may have an adverse impact on growth and development. Although currently experimental in nature, biomedical treatment approaches hold promise that they may, in the future, be a safe and effective intervention strategy.

Recommendation:

o Establish and maintain a juvenile sexual assault research consortium which would include professional involved with the issue, including representatives of the criminal justice field.

Cost:

\$250,000

IV. PREVENTION AND EARLY INTERVENTION SOLUTIONS

PUBLIC AWARENESS

Social norms and values define acceptable and unacceptable behaviors. These values and norms are powerfully reflected in television, movies, and advertising. Implied or explicit messages that portray sex, violence, abuse of power or authority and depict children as sexual objects may create an environment conducive to child sexual assault.

The public must become aware of the dynamics, scope and impact of child sexual assault. The media should be encouraged to produce programs and positive messages about male/female relationships that do not involve abuse, or inappropriate use of power. Awareness campaigns should reach schools, colleges and universities, youth organizations, libraries, businesses and religious organizations.

Recommendations:

o Create a public-private partnership to develop and mount a public education program and media campaign on the prevention of sexual assault.

Cost:

\$250,000

- o Direct the Council on Higher Education, through a letter from the Commission, to continue to promote the expansion of sexual abuse prevention programs on all campuses.
- o Through a letter from the Commission, request that the Children's Resource Center identify and assist private organizations to establish a "media watch" to monitor and publicize the level of violence portrayed in the media.
- o Establish an inter-agency taskforce to explore and establish a speakers bureau to address civic, parent, church, professional and other groups on appropriate and inappropriate sexual attitudes and behaviors, especially with children.
- o Request the Department of Education, through a letter from the Commission, to encourage all school districts to implement conflict resolution and social problem-solving programs in all elementary and secondary schools.

PUBLIC EDUCATION PROGRAMS

Comprehensive programs that teach children, parents, teachers, care givers, health and mental health professionals how to protect children from sexual abuse should be developed and implemented in every community. These programs must be coordinated with existing treatment services.

Examples of public education programs:

- The Child Assault Prevention Program, CAPP, a professionally staffed program now provided in the Charlottesville and Winchester school systems.
- "Hugs & Kisses", a child sexual abuse prevention play performed by Theatre IV of Richmond, in collaboration with local Child Protective Services, which is presented in schools, libraries, recreation and day-care programs statewide.

Recommendations:

o Establish a separate category for sexual abuse prevention programs in the Family Violence Prevention Program. Eligible programs should demonstrate their needs assessment and implementation plan and put a premium on local planning efforts.

Cost: \$500,000

o Fund 340 performances of "Hugs and Kisses" at approximately \$500 per performance. \$30,000 should be earmarked for evaluating the program.

Cost: \$200,000

- o Direct the Departments of Health, Education, Youth and Family Services, and Mental Health, Mental Retardation and Substance Abuse Services to incorporate sexual abuse prevention information in all their health education efforts.
- o Direct all public youth-serving agencies to make child sexual abuse prevention a program development priority in the next biennium. Require a status report to the Commission in December of 1993.

FAMILY SERVICES IN PREVENTION

Although it may be hard to accept, a high percentage of sexual assault occurs within the family. Most parents have no idea how to tell if their child is being abused or what to do if such abuse occurs. Further, very few parents are trained to help their children heal the scars of sexual abuse.

Children, by their nature, make ideal victims. They are naturally curious, easily led by adults and older children, and have a high need for affection, attention and approval. Often, when abuse occurs within families, the non-abusing parent is often unable or unwilling to acknowledge the abuse and support the child who has been victimized. Siblings of abused children and siblings of abusive

children run a high risk of abuse themselves. It is important also not to leave out the family of the child victim or juvenile offender.

Parenting programs have been proven to be effective in teaching parents to avoid becoming abusers. Such family skills programs have the ability to strengthen the family, and give them a better chance at avoiding abuse within the family, and increased skills in responding appropriately to abuse if it occurs outside the home. More family strengthening programs must be developed and made available in order to teach parents how to protect their children from abuse and recognize abuse when it occurs.

Recommendations:

o Expand the prevention/early intervention component of the Trust Fund established through the Comprehensive Services Act for At-Risk Youth and Families to support early parenting education programs.

Cost:

\$500,000

SCHOOL ROLES IN PREVENTION

Schools play a vital role in a child's life outside of his or her home, and the people who work in schools must be actively involved in efforts to prevent child sexual abuse. They should receive effective training to identify and respond to disclosures of abuse. Every attempt must be made to keep schools as safe as possible for children.

Examples of school roles in prevention:

- Screening protocols used to hire new personnel which include criminal and child abuse register checks
- School guidance counselors who are trained to act as liaisons to and coordinators of child abuse programs

- o Request the Department of Education, to require training on sexual assault for guidance counselor certification.
- o Request, that local school boards ensure that all personnel receive training in how to identify abuse victims and potential offenders as well as the appropriate response to disclosures of abuse.
- o Request the Department of Education, to ensure that all school divisions implement the Family Life Education Standards of Learning involving child abuse.

o Support full funding for qualified school guidance counselors, school social workers and school psychologists at the elementary, middle and secondary school levels.

The above recommendations will be communicated to the Department of Education for action through a letter or request from the Commission.

COOPERATIVE TRAINING

- Through a letter of request from the Commission, the Commonwealth Attorney's Services and Training Council should provide training to prosecutors on the use of protective orders pending trial, taking the best interests of the child into consideration, to protect a child from a parent suspected of child sexual abuse.
- Attorneys should not be appointed as Guardians Ad Litem unless they have received special training. Through a letter of request from the Commission, the Virginia Supreme Court and the Virginia State Bar should develop standards for training Guardians Ad Litem who represent child victims of sexual assault.
- o Prosecutors and judges should be encouraged, through their professional training, to ensure that the crime victim is kept involved and informed in every stage of the trial process, including the negotiation of a plea.
- o The Virginia Supreme Court should provide training to juvenile and domestic relations judges, circuit court judges and family court judges in the following areas:
 - 1. The proper collection and use of victim impact statements in juvenile court proceedings;
 - 2. The use of protective orders pending trials, taking the best interests of the child into consideration, to protect a child from a parent suspected of child sexual abuse;
 - 3. General information surrounding issues of child sexual abuse and assault in order to improve awareness and understanding to facilitate improved judicial handling of sexual abuse/assault cases.

STUDY RESOLUTIONS

- Dissociative disorders and false memory syndrome should be studied, by a subcommittee appointed by the Commission. The membership should be composed of legislators, judges, prosecutors, trial lawyers, medical professionals and counselors. The study should take into consideration the unique legal issues that are raised, including the dismissal and settlement of suits, the qualification of persons with dissociative disorder to testify in civil and criminal cases and the controversy surrounding the existence of false memory syndrome. Findings and recommendations should be reported to the Governor and General Assembly by January, 1994.
- The issues of polygraph examinations of sexual assault victims, payment of PERKs (Physical Evidence Recovery Kits), consent to sexual assault, abuse of authority and attempted abduction of children, as these issues relate to sexual assault offenses, should be studied further by the Virginia State Crime Commission, with findings and recommendations to be reported to the Commission and the Governor and General Assembly by January, 1994.
- The issues of courtroom environment development, including use of closed circuit testimony, court school programs, the role of the guardian ad litem and the renumeration rate should be studied by the Virginia Commission on Youth, with the support of the Virginia Supreme Court, the Virginia State Bar and the Department of Criminal Justice Services, with findings and recommendations to be reported to the Commission, and the Governor and General Assembly by December, 1993.
- o Eliminating the seduction of chaste female statutes, <u>Code of Virginia</u> 18.2-68, -69, and -70, should be evaluated both in light of a recent court case and its apparent policy conflict with the Virginia rape shield law. The continued commission should make its recommendations by December, 1993
- A study should be conducted by the Commonwealth Attorney's Training and Services Council and the State Compensation Board to study the directives of Code of Virginia §16.1-232, and consider the feasibility and the fiscal impact of requiring Commonwealth's Attorneys to prosecute sexual assault misdemeanors in Juvenile and Domestic Relations Court, with findings and recommendations to be reported to the Commission, and the Governor and General Assembly by December, 1993.
- o The Commission on Youth should evaluate the feasibility of establishing a mandatory 10-year follow-up program for juvenile sex offenders which could extend beyond their 18th birthday.

- o The Commission should appoint a subcommittee to study the impact of amending §63.1-248 of Code of Virginia to provide for services to child victims of non-caretaker sexual abuse. The study should include the evaluation of the incidence of non-caretaker abuse, the services needed by the victim and family, the development of a unified system response, and the identification of the resources needed to implement such a plan. The subcommittee should report its findings, with legislative and budget proposals, to the commission by December, 1993.
- The full Commission on the Reduction of the Incidence of Sexual Assault Victimization in the Commonwealth should be extended for one additional year in order to receive the findings of the several study committees established through its initial recommendations. All study committees should report their findings and recommendations to the Commission by December, 1993.



Donald S. Beyer, Jr.

Office of the Lieutenant Governor Richmond 23219

(804) 786-2078

January 19, 1993

The Honorable Edward M. Holland Member, Virginia Senate General Assembly Building, Room 432 Richmond, Virginia 23219

Dear Ed:

During the past year we have chaired and vice-chaired the Commission on the Reduction of the Incidence of Sexual Assault in the Commonwealth. This Commission has submitted its report to the 1993 General Assembly and should be available soon.

On behalf of the Commission, we endorse the recommendation found in the Report of the Family Court Pilot Project (Senate Document No. 22) that there be one trial court which has comprehensive jurisdiction over child and family-related legal issues. We understand you will be the chief patron in the Senate of legislation which implements this recommendation, and we support your efforts in this regard.

Because there is no single portal through which victims can receive treatment services, the current court system configuration in Virginia with respect to child sexual abuse prosecution often requires the victim to undergo two separate legal proceedings in District and Circuit Court. Concern over the trauma to the child and the need to provide distinct expertise and support for all family-related legal matters prompted the 1989 General Assembly to establish the Family Court Pilot Project. The Project concluded that through the establishment of a single court, the length of time to resolve emotionally charged litigation limits the detrimental impact on the child and adults involved in the proceedings. The Commission concurs with this conclusion.

Thank you for your contribution to improving our justice system's services to families and children.

Sincerely

Donald S. Beyer, Jr.

Chairman

R. Edward Houck Vice-Chairman



Donald S. Beyer, Jr.
Lieutenant Governor

Office of the Lieutenant Governor Richmond 23219

(804) 786-2078

January 19, 1993

The Honorable James F. Almand Member, Virginia House of Delegates General Assembly Building, Room 444 Richmond, Virginia 23219

Dear Jim:

During the past year we have chaired and vice-chaired the Commission on the Reduction of the Incidence of Sexual Assault in the Commonwealth. This Commission has submitted its report to the 1993 General Assembly and should be available soon.

On behalf of the Commission, we endorse the recommendation found in the Report of the Family Court Pilot Project (Senate Document No. 22) that there be one trial court which has comprehensive jurisdiction over child and family-related legal issues. We understand you will be the chief patron in the House of Delegates, of legislation which implements this recommendation, and we support your efforts in this regard.

Because there is no single portal through which victims can receive treatment services, the current court system configuration in Virginia with respect to child sexual abuse prosecution often requires the victim to undergo two separate legal proceedings in District and Circuit Court. Concern over the trauma to the child and the need to provide distinct expertise and support for all family-related legal matters prompted the 1989 General Assembly to establish the Family Court Pilot Project. The Project concluded that through the establishment of a single court, the length of time to resolve emotionally charged litigation limits the detrimental impact on the child and adults involved in the proceedings. The Commission concurs with this conclusion.

Thank you for your contribution to improving our justice system's services to families and children.

Sincerely,

Donald S. Beyer, Jr.

Chairman

R. Edward Houck Vice-Chairman



Donald S. Beyer, Jr.

Office of the Lieutenant Governor
Richmond 23219

(804) 786-2078

January 18, 1993

O. Randolph Rollins
Secretary of Public Safety
202 North 9th Street, Room 613
Richmond, Virginia 23219

Dear Randy:

Thank you for your participation on the Commission for the Reduction of the Incidence of Sexual Assault Victimization in the I think we all found this to be an exceptionally Commonwealth. powerful experience as we heard about the pain and terror of children violated by incest and other sexual assaults. Our multifaceted approach to addressing this problem includes changing the legal structure, intervening aggressively with both victims and offenders, and teaching our children in our communities to recognize/prevent assault and disclose abuse. If successful, we can have a marked and multi-generational impact on the incidence of child sexual assault. I am writing to you in your role as the Chairperson of the Governor's Commission on Violent Crime. We are aware that the Sex Offender Task Force convened under the auspices of Deputy Secretary T. Twitty and Clarence Jackson, Chairman of the Parole Board, examined the issue of a sex offender registry. my understanding that the Sex Offender Task Force has requested that the Governor's Commission on Violent Crime undertake a study to examine the feasibility and cost effectiveness of implementing the sex offender registry in the Commonwealth. Our Commission supports this recommendation as we feel that a sex offender registry has promise to potentially reduce the incidence of sexual assault. We are particularly interested in this study examining the feasibility of including juvenile offenders in a sex offender registry. The inclusion of juveniles will require examining several issues which may have more of an impact on a youthful population. Particularly concerns have been raised that a registry would stigmatize juvenile offenders to the point that they would be likely to participate in and benefit from treatment interventions.

The Honorable O. Randolph Rollins January 18, 1993 Page Two

Overall, it is the Commission's conclusion that the concept of a sex offender registry warrants careful consideration in the Commonwealth. We support the Sex Offender Task Force request to you to fully examine the feasibility and cost-effectiveness of such an approach.

Please contact me if I can provide you with any additional information regarding our interest in this issue. We fully appreciate your commitment and your willingness to participate in this process.

Sincerely,

onald S. Beyer

Chairman

R. Edward Houck Vice-Chair



Donald S. Beyer, Jr.

Office of the Lieutenant Governor Richmond 23219

(804) 786-2078

January 18, 1993

Robert N. Baldwin Executive Secretary Supreme Court of Virginia 100 North 9th Street Richmond, Virginia 23219

Dear Rob:

Thank you for your participation on the Commission for the Reduction of the Incidence of Sexual Assault Victimization in the Commonwealth. I think we all found this to be an exceptionally powerful experience as we heard about the pain and terror of children violated by incest and other sexual assaults. Our multifaceted approach to addressing this problem included changing the legal structure, intervening aggressively with both victims and offenders and teaching our children in our communities to recognize/prevent assault and disclose abuse. If successful we can have a marked and multi-generational impact on the incidence of child sexual assault.

We are requesting your help on one very specific issue. review of the professional literature, as well as testimony from legal and mental health professionals, we agreed that management of juvenile sex offenders who are brought to the attention of the courts is a complex and sometimes controversial There appears to be general agreement that both public safety and treatment needs of the juvenile must be considered in crafting any dispositional plan. However, the subtleties of these plans which must address issues regarding confidentiality, reports monitoring of potentially deviant behavior, to the courts, responsiveness to treatment, family involvement in treatment, and the decision to terminate a treatment program are not generally familiar to the legal community. Whether these treatment plans are developed for individuals who will remain in the community or after they have completed an offense specific treatment program, they must all focus on the critical issues to help the juvenile not reoffend.

Robert N. Baldwin January 18, 1993 Page Two

Given the complexity of these issues there was consensus that model court orders might be a benefit to all individuals involved in managing these difficult cases. This would assure that the salient factors related to both public safety and effective clinical interventions would be included. We are requesting that the Office of the Supreme Court in conjunction with the Department of Mental Health, Mental Retardation and Substance Abuse Services and the Department of Youth and Family Services draft model court orders which would address the issues involved in the successful management of juvenile sex offenders. It is our hope that these model orders could be made available to all judges in the Commonwealth to assist them in their responsibilities related to these most challenging cases.

Please contact me if I can provide you any additional information or guidance regarding our interest in this issue. We fully appreciate your commitment and your willingness to participate in this process.

Sincerely,

Donald S. Beyer Lieutenant Governor R. Edward Houck Vice-Chairman



Donald S. Beyer, Jr. Lieutenant Governor

Office of the Lieutenant Governor Richmond 23219

(804) 786-2078

January 18, 1993

Robert Burrus, Chairman Council of Higher Education Monroe Building North 101 14th Street Richmond, Va. 23219

Dear Mr. Burrus:

I am pleased to present to you the final copy of the report from the Commission on the Reduction of Sexual Assault. Although the subject area was often difficult and at times even frightening, I believe the Commission was able to frame a series of recommendations to reduce the incidence of sexual assault in the Commonwealth, and to assist the victims of this violence. Our recommendations are designed to impact several arenas: changing the legal structure to assist in the prosecution of these crimes; assuring intervention with child victims and juvenile offenders; and promoting the Commonwealth's prevention initiatives.

The Commission recognized the work of the Council on Higher Education toward the elimination of sexual assault on Virginia's college campuses. Because of the importance of this work, the Commission is recommending that the Council continue to promote the expansion of sexual abuse prevention programs on all campuses. I am sure you will agree that this recommendation reflects the Council's commitment to address this serious problem.

The Commission is also recommending that all appropriate state agencies make the development of child sexual abuse prevention programs a priority. Only through a concerted effort will we be able to truly reduce the incidence of sexual assault in the Commonwealth. Please do not hesitate to contact me should you have any questions regarding the Commission's recommendations.

Sincerely,

Donald S. Beyer

Chairman

R. Edward Houck Vice-Chairman

enclosure

cc: Gordan Davies



Donald S. Beyer, Jr. Lieutenant Governor Office of the Lieutenant Governor Richmond 23219

(804) 786-2078

January 18, 1993

The Honorable Clarence A. Holland Member, Virginia Senate General Assembly Building, Room 426 Richmond, Virginia 23219

Dear Clancy:

We are writing to call the attention of the Special Advisory Commission on Mandated Insurance Benefits to a health problem which has until recently remained largely hidden. During the past six months in which we have served as Chair and Vice Chair of the Commission on the Reduction of the Incidence of Sexual Assault Victimization in the Commonwealth it has become clear to us that sexual assault, though often ignored, is of epidemic proportions in Virginia and elsewhere. Moreover, the impact of sexual victimization upon the developing child continues to manifest itself in his or her physical and emotional health over the lifetime of an adult.

It has been the consensus of the members of the commission that treatment is crucial in ameliorating the destructive injury done to the sexual assault victim, and interrupting the cycle by which victims become victimizers. Specifically, the commission will recommend that insurance coverage which permits mental health treatment of victimized adults and children be equitable with that which covers their physical health needs. We will also request that your commission examine and propose remedies to reduce the barriers to treatment faced by sexual assault victims, as well as the stigma of being labeled mentally ill.

As chairman, I would welcome the opportunity to meet with the Commission on Mandated Benefits, to acquaint you with the harsh statistics and the equally disturbing testimony we have received in the course of our public hearings.

The Honorable Clarence A. Holland January 18, 1993 Page Two

I would ask that you give consideration to the problem of sexual victimization as an emerging issue for the insurance industry, and one which should be examined as your commission reports to the General Assembly. The social costs are so obvious, in health, in education, and the instability of families, that strategies must be developed to ensure that no sexually abused child or adult is denied treatment.

Singerely,

Donald S. Beyer, Jr.

Chairman

R. Edward Houck Vice-Chairman



Donald S. Beyer, Jr. Lieutenant Governor

Office of the Lieutenant Governor Richmond 23219

(804) 786-2078

January 13, 1993

Rev. John Jordan Chair State Board of Mental Health, Mental Retardation, and Substance Abuse Services P.O. Box 1791 Richmond, Virginia 23214

Dear Rev. Jordan:

I am pleased to present to you the final copy of the report from the Commission on the Reduction of Sexual Assault. Although the subject area was often difficult and at times even frightening, I believe the Commission was able to frame a series of recommendations to reduce the incidence of sexual assault in the Commonwealth, and to assist the victims of this violence. Our recommendations are designed to impact several arenas: changing the legal structure to assist in the prosecution of these crimes; assuring intervention with child victims and juvenile offenders; and promoting the Commonwealth's prevention initiatives.

The Commission recognized the work of the Department of Mental Health, Mental Retardation, and Substance Abuse Services in treating victims of abuse. We also believe that the Department is the State agency which can best set the pace for research and evaluation in this critical area. We are respectfully requesting the Department to explore the development of a consortium of university based researchers. We envision the consortium to promote research regarding the nature, extent, and impact of juvenile sexual assault, and to work with community agencies to evaluate the effectiveness of prevention and treatment programs in the Commonwealth. A consortium can provide coordination of efforts and promote for the best use of our resources. The Commission will seek a status on this request in December of 1994.

The Commission is also recommending that all appropriate state agencies make the development of child sexual abuse prevention programs a priority. Only through a concerted effort will we be

Rev. John Jordan January 13, 1993 Page Two

able to truly reduce the incidence of sexual assault in the Commonwealth. Please do not hesitate to contact me should you have any questions regarding the Commission's recommendations.

Sincerely

Donald S. Beyer

Chairman

R. Edward Houck Vice-Chairman

Enclosure

cc: King E. Davis



Donald S. Beyer, Jr. Lieutenant Governor Office of the Lieutenant Governor
Richmond 23219

(804) 786-2078

January 13, 1993

Mr. Frank Horton Chairman State Board of Social Services 8007 Discovery Drive Richmond, Virginia 23229

Dear Mr. Appor -

I am pleased to present to you the final copy of the report from the Commission on the Reduction of Sexual Assault. Although the subject area was often difficult and at times even frightening, I believe the Commission was able to frame a series of recommendations to reduce the incidence of sexual assault in the Commonwealth, and to assist the victims of this violence. Our recommendations are designed to impact several arenas: changing the legal structure to assist in the prosecution of these crimes; assuring intervention with child victims and juvenile offenders; and promoting the Commonwealth's prevention initiatives.

The Commission recognized the critical role of the State and local departments of social services in responding to allegations of child sexual assault and in promoting the prevention of child victimization. The Commission has endorsed the recommendations adopted by the State Board of Social Services stemming from the study of third-party perpetrators. The Commission is opposed to removing out-of-family caretakers from the purview of Child Protective Services. Also, the Commission encourages the State Board to enact policy to change the standard of evidence necessary to "found" a Child Protective Services case from "clear and convincing" to "a preponderance." We believe this change is needed to protect children.

The Commission is also recommending that all appropriate state agencies make the development of child sexual abuse prevention programs a priority. Only through a concerted effort will we be

Mr. Frank Horton January 13, 1993 Page Two

able to truly reduce the incidence of sexual assault in the Commonwealth. Please do not hesitate to contact me should you have app questions regarding the Commission's recommendations.

Sincerely,

Donald S. Beyer

Chairman

R. Edward Houck Vice-Chairman

Enclosure

cc: Larry Jackson



Donald S. Beyer, Jr. Lieutenant Governor

Office of the Lieutenant Governor Richmond 23219

(804) 786-2078

January 13, 1993

James P. Jones
Chairman
State Board of Education
Monroe Building
North 101 14th Street
Richmond, Va. 23219

Dear Mr. Donas

I am pleased to present to you the final copy of the report from the Commission on the Reduction of Sexual Assault. Although the subject area was often difficult and at times even frightening, I believe the Commission was able to frame a series of recommendations to reduce the incidence of sexual assault in the Commonwealth, and to assist the victims of this violence. Our recommendations are designed to impact several arenas: changing the legal structure to assist in the prosecution of these crimes; assuring intervention with child victims and juvenile offenders; and promoting the Commonwealth's prevention initiatives.

The Commission recognized the important role of school personnel in reaching victims of child sexual assault, and in enabling professionals and children to develop the skills necessary to the prevention of victimization. The Commission also recognized that the Department of Education is critical to efforts promoting local schools' awareness of and response to child victimization. The Commission therefore has cited the Department of Education in several of its final recommendations. These recommendations follow.

- * Request the Department of Education to encourage all school districts to implement conflict resolution and social problem-solving programs in all elementary and secondary schools.
- * Request the Department of Education to ensure that all school divisions implement the Family Life Education standards of Learning involving child abuse.

James P. Jones January 13, 1993 Page Two

* The Commission supports full funding for qualified school guidance counselors and social workers at the elementary, middle, and secondary school levels.

The Commission is also recommending that all appropriate state agencies make the development of child sexual abuse prevention programs a priority. Only through a concerted effort will we be able to truly reduce the incidence of sexual assault in the Commonwealth. Please do not hesitate to contact me should you have any questions regarding the Commission's recommendations.

Sincerely,

onald S. Beyer

Chairman

R. Edward Houck Vice-Chairman

Enclosure

cc: Joseph Spagnolo



Donald S. Beyer, Jr.

Office of the Lieutenant Governor Richmond 23219

(804) 786-2078

January 13, 1993

The Honorable Robert B. Ball, Sr. Chairman
Virginia State Crime Commission
910 Capitol Street, Suite 915
Richmond, Yirginia 23219

Dear Delegate Ball:

The Commission on the Reduction of the Incidence of Sexual Assault Victimization recently completed its formal study and has developed its findings and recommendations for the Governor and 1993 General Assembly. During the course of the study, the Legal Issues Subcommittee, chaired by Delegate Jay DeBoer, examined Virginia's sexual assault laws and related legal issues.

The subcommittee observed that several issues would require further study, and requested that the Commission ask the Virginia State Crime Commission to examine these issues. The issues recommended for study by the Crime Commission are as follows:

- 1. The advantages, disadvantages and propriety of polygraph examinations of child sexual assault victims to facilitate law enforcement investigations and prosecutions;
- 2. The payment of costs related to the recovery of physical evidence from sexual assault victims, particularly in cases that are unfounded or not prosecuted, and whether criteria should be established concerning the responsibility for payment of these costs;
- 3. The issue of consent as an element of sexual assault crimes, particularly in cases involving abuse of authority or child victims; and
- 4. The possible revision of Virginia's statute concerning the abduction of children to more fully address the crime of attempted abduction for the purpose of child sexual assault.

The Crime Commission is uniquely qualified to study these legal issues related to sexual assault. The Commission on the Reduction of the Incidence of Sexual Assault Victimization offers its assistance to the Crime Commission in identifying persons with special expertise in these areas to assist the Crime Commission in

The Honorable Robert B. Ball, Sr. January 13, 1993
Page Two

its study efforts. The Sexual Assault Victimization Commissio hereby requests that the Crime Commission complete the requeste studies by September 1, 1993, for consideration and possibl inclusion in the Commission's second year report to the Governo and 1994 General Assembly.

Your participation in this effort is most appreciated. The Sexua Assault Victimization Commission looks forward to working with th Crime Commission in 1993 on the critical issue of child sexua assault.

Sincerely,

onald S. Beyer

Chairman

R. Édward Houck Vice-Chairman

Enclosure

cc: Delegate Jay DeBoer

Fred Russell, Executive Director Virginia State Crime Commission



Donald S. Beyer, Jr.

Office of the Lieutenant Governor Richmond 23219

(804) 786-2078

January 13, 1993

Mr. Walter S. Felton, Jr.
Administrator
Commonwealth's Attorneys' Services Council
Post Office Box 3549
Williamsburg Virginia 23187-3549

Dear Mr. Felyphic -

The Commission on the Reduction of the Incidence of Sexual Assault Victimization recently completed its formal study and has developed its findings and recommendations for the Governor and 1993 General Assembly. During the course of the study, the Legal Issues Subcommittee, chaired by Delegate Jay DeBoer, examined the issue of prosecution of sexual assault misdemeanors in Juvenile and Domestic Relations Court.

It was brought to the attention of the subcommittee that, due mostly to budget constraints, Assistant Commonwealth's Attorneys do not, as a rule, prosecute sexual assault misdemeanors in Juvenile and Domestic Relations Court. This puts Juvenile and Domestic Relations Court judges in the position of serving as both prosecutor and judge in these cases. It may be that, given the present resources in the Commonwealth's Attorneys offices, prosecuting sexual assault misdemeanors is not an efficient use of these limited resources.

In the interest of ensuring that the prosecution of sexual assault crimes, both felonies and misdemeanors, is treated as a serious Virginia, Commission in the requests that Commonwealth's Attorney's Training and Services Council, cooperation with State Compensation Board, the study feasibility and fiscal impact of requiring Commonwealth's Attorneys to prosecute sexual assault misdemeanors in Juvenile and Domestic Relations Court. The study should examine the advantages and disadvantages of directing the resources of the Commonwealth's Attorney's offices to be responsible for these prosecutions, and estimate the annual costs associated with requiring such The Council is requested to submit findings and prosecutions. recommendations to the continuing Commission by August 1, 1993, for consideration and possible inclusion in the Commission's second year report to the Governor and 1994 General Assembly.

Mr. Walter S. Felton, Jr. January 13, 1993
Page Two

Your participation in this effort is most appreciated. Please feel free to contact my office for any assistance you may require to complete this requested study.

Sincerely,

Dohald S. Beyer

Chairman

R. Edward Houck Vice-Chairman

Enclosure

cc: Delegate Jay DeBoer

Bruce Haynes, Executive Secretary State Compensation Board



Donald S. Beyer, Jr.

Office of the Lieutenant Governor Richmond 23219

(804) 786-2078

January 13, 1993

Mr. Robert Baldwin Executive Secretary Supreme Court of Virginia 100 North 9th Street Richmond, Virginia 23219

Dear Mr. Kalawin:

The Commission on the Reduction of the Incidence of Sexual Assault Victimization recently completed its formal study and has developed its findings and recommendations for the Governor and 1993 General Assembly. During the course of the study, the Legal Issues Subcommittee, chaired by Delegate Jay DeBoer, examined the issue of training for judges on the issue of sexual assault.

After considering testimony that came before the Commission, the Legal Issues Subcommittee determined that special training should be made available to Juvenile and Domestic Relations Court judges, circuit court judges and family court judges in the following areas:

- 1. The proper collection and use of victim impact statements in juvenile court proceedings;
- 2. The use of protective orders pending trials, taking the best interests of the child into consideration, to protect a child from a parent suspected of child sexual abuse; and
- 3. General information surrounding the issues of child sexual abuse and assault in order to improve awareness and understanding to facilitate improved judicial handling of sexual abuse/assault cases.

Additionally, the Legal Issues Subcommittee heard testimony concerning the qualifications of Guardians Ad Litem who are appointed to represent child victims of sexual assault. The subcommittee determined that special training on child sexual assault also should be made available to attorneys who are to be appointed as Guardians Ad Litem in child sexual assault cases.

The Commission hereby requests that the Virginia Supreme Court develop and make available special training for Juvenile and

Mr. Robert Baldwin January 13, 1993 Page Two

Domestic Relations court judges, circuit court judges and family court judges on the issue of child sexual assault and the impact of victimization, the use of victim impact statements in child sexual assault cases heard in juvenile court, and the use of protective orders when a parent is suspected of child sexual abuse. Additionally, the Commission requests that the Virginia Supreme Court and the Virginia State Bar develop training standards for attorneys who are court-appointed to represent child victims of sexual assault.

The Commission considers the development of these specialized training programs to be a key element in improving the prosecution of child sexual assault crimes in Virginia, and in providing adequately-trained counsel for child victims. These training proposals are designed to help judges and attorneys to understand more completely the complexities and impact of sexual assault victimization on children.

Your participation in this effort is most appreciated. Please feel free to contact my office for any assistance you may require to develop these training programs.

Sincerely,

Donald S. Beyer

Chairman

R. Edward Houck Vice-Chairman

c: Delegate Jay DeBoer

Thomas A. Edmonds, Executive Director Virginia State Bar